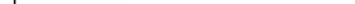


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. 209310US0 First Inventor or Application Identifier Veronique GUILLOU Title FOAMING COSMETIC CREAM
		Assignee Name: L'OREAL Assignee Address: 14, rue Royale, 75008 Paris, France
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification Total Sheets 23</p> <p>3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets </p> <p>4. <input type="checkbox"/> Oath or Declaration Total Pages </p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation / divisional w/ box 17 completed)</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attesting to deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>)</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="margin-left: 20px;">b. Specification or Sequence Listing on:</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below.</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: </p> <p><i>Prior application information:</i> Examiner: Group Art Unit: </p> <p><small>For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small></p> <p>18. Amend the specification by inserting before the first line the sentence:</p> <p><input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on </p> <p><input type="checkbox"/> Which was published in English</p> <p><input type="checkbox"/> Which was not published in English</p> <p><input type="checkbox"/> This application claims priority of provisional application Serial No. Filed </p>		<p>ACCOMPANYING APPLICATION PARTS</p> <p>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations (5)</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</p> <p>14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)</p> <p>15. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>16. <input checked="" type="checkbox"/> Other: Request for Priority French Search Report List of Inventors' Names and Addresses</p>
19. CORRESPONDENCE ADDRESS		
 22850 (703) 413-3000 FACSIMILE: (703) 413-2220		

Name:	Norman F. Oblon	Registration No.:	24,618
Signature:		Date:	6/22/01
Name:	Charu Narang Moody	Registration No.:	44,963

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Veronique GUILLOU et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: FOAMING COSMETIC CREAM

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	20 - 20 = 0		× \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 = 0		× \$10 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
				BASIC FEE
				\$710.00
				TOTAL OF ABOVE CALCULATIONS
				\$840.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
				TOTAL
				\$840.00

Please charge Deposit Account No. 15-0030 in the amount of

A duplicate copy of this sheet is enclosed.

A check in the amount of \$840.00 to cover the filing fee is enclosed.The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.

A duplicate copy of this sheet is enclosed.

Date: 6/22/01**22850**Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 10/00)

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Norman F. Oblon
Registration No. 24,618Charu Narang Moody
Registration No. 44,963